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CONFIRMATION NO. 8867

SERIAL NUMBER 09/870,135	FILING OR 371(c) DATE 05/30/2001 RULE	CLASS 083	GROUP ART UNIT 3724	ATTORNEY DOCKET NO. 056848-5003
APPLICANTS Christopher Charles Norris Callow, Bendigo, AUSTRALIA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** AUSTRALIA PQ 7839 05/30/2000 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/27/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 4	TOTAL CLAIMS 8
INDEPENDENT CLAIMS 1				
ADDRESS 09629				
TITLE Cutting machine for brick making				
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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APPLICANTS Christopher Charles Norris Callow, Bendigo, AUSTRALIA; ** CONTINUING DATA ***** <i>None</i> ** FOREIGN APPLICATIONS ***** AUSTRALIA PQ 7839 05/30/2000 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/27/2001				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 4	TOTAL CLAIMS 8
INDEPENDENT CLAIMS 1				
ADDRESS Hopgood, Calimafde, Judlowe & Mondolino 60 East 42nd Street New York, NY 10165				
TITLE Cutting machine for brick making				
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	